

Fill in this information to identify the case:

Debtor name Zen Restoration Inc

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) 1-22-40809

Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.  
 Yes. Go to line 2.

#### Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	<p>Nonpriority creditor's name and mailing address  <b>Menkos Corp./ Gleason 64-01 Roosevelt Avenue Woodside, NY 11377</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Additional Notice</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.2	<p>Nonpriority creditor's name and mailing address  <b>Abbot Paint 238 Egle Street Brooklyn, NY 11222</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Unpaid bill</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,911.82</b>
3.3	<p>Nonpriority creditor's name and mailing address  <b>Allan Mcilvain 501 Market Street Marcus Hook, PA 19061</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Unpaid bill - judgment</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,805.18</b>
3.4	<p>Nonpriority creditor's name and mailing address  <b>Angel Diaz c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Unpaid Wages</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name _____			
3.5	Nonpriority creditor's name and mailing address <b>Bank Direct - Insurance</b> <b>150 North Field Drive</b> <b>Ste 190</b> <b>Lake Forest, IL 60045</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$30,397.61</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address <b>Bartlomeij Kochanczyk</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address <b>Bernard Sobus</b> <b>c/o Zen Restoration, Inc.</b> <b>273 Russell Street</b> <b>Brooklyn, NY 11222</b> Date(s) debt was incurred <u><b>Various years</b></u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$875,000.00</b>
		<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Loans/monetary contributions to the Debtor</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address <b>Bilski Lukasz</b> <b>102 India Street #4L</b> <b>Brooklyn, NY 11222</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,412.00</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address <b>Black, Marjeh &amp; Sanford</b> <b>100 Clearbrook Road</b> <b>Suite 345</b> <b>Elmsford, NY 10523</b> Date(s) debt was incurred <u><b>2020</b></u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$179,233.34</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Disputed legal fees</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address <b>Bogdan S Koscielny</b> <b>c/o Joseph &amp; Norisberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address <b>BNY</b> <b>PO Box 2068</b> <b>Astoria, NY 11102</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$550.00</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.12	Nonpriority creditor's name and mailing address <b>Brozyna Robert</b> <b>60-25 74th St</b> <b>Middle Village, NY 11379</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$10,587.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13	Nonpriority creditor's name and mailing address <b>Cabuco Matias</b> <b>1412 Dekalb Ave., Apt# 2L</b> <b>Brooklyn, NY 11237</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,515.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	Nonpriority creditor's name and mailing address <b>Caiza Carlos</b> <b>37-40 59th Street</b> <b>Woodside, NY 11377</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,301.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15	Nonpriority creditor's name and mailing address <b>Campos Pasten</b> <b>Salatiel Enrique</b> <b>5101 Hillyer St</b> <b>Elmhurst, NY 11373</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,192.50</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16	Nonpriority creditor's name and mailing address <b>Capital One</b> <b>PO Box 85015</b> <b>Richmond, VA 23285</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12,013.37</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>judgment</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.17	Nonpriority creditor's name and mailing address <b>Castro Jose</b> <b>35-20 94th St Apt#2E</b> <b>Jackson Heights, NY 11372</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,456.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18	Nonpriority creditor's name and mailing address <b>Cezary Sawicki</b> <b>c/o Robert Wisniewski</b> <b>17 State Street, Ste 820</b> <b>New York, NY 10004</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.19	Nonpriority creditor's name and mailing address <b>Chimborazo Fausto</b> <b>51-01 Hillyer Street, #3F</b> <b>Elmhurst, NY 11373</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages - case in the labor department</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20	Nonpriority creditor's name and mailing address <b>Chomnalez case</b> <b>179 East 71st Street</b> <b>Townhouse</b> <b>New York, NY 10021</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$350,000.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>partialy paid - outstanding balance approx.</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.21	Nonpriority creditor's name and mailing address <b>Con Edison</b> <b>4 Irving Place</b> <b>New York, NY 10003</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$28,364.42</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.22	Nonpriority creditor's name and mailing address <b>Connecticut Saw &amp; Yool</b> <b>140 Avon Street</b> <b>Stratford, CT 06615</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,633.58</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23	Nonpriority creditor's name and mailing address <b>Daniec Zdzislaw</b> <b>1760 66 Street</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,180.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24	Nonpriority creditor's name and mailing address <b>Dariusz Stoprya</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25	Nonpriority creditor's name and mailing address <b>DeLage Landen</b> <b>1111 Old Eagle School Rd</b> <b>Suite 1</b> <b>Wayne, PA 19087</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,059.97</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.26	Nonpriority creditor's name and mailing address <b>Dota Jonny</b> <b>43-18 Elbertson Street</b> <b>Elmhurst, NY 11373</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,176.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27	Nonpriority creditor's name and mailing address <b>Dota Jose</b> <b>43-18 Elbertson Street</b> <b>Elmhurst, NY 11373</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$11,851.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address <b>Everest National Insurance</b> <b>100 Everest Way</b> <b>Warren, NJ 07059</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$19,182.36</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.29	Nonpriority creditor's name and mailing address <b>Fromelc Marian</b> <b>83-25 98th Str, #5G</b> <b>Woodhaven, NY 11421</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address <b>Gabor Fazekas</b> <b>75-59 Metropolitan Ave</b> <b>Middle Village, NY 11379</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address <b>Galindo Samuel</b> <b>109-26 Westside Ave</b> <b>Corona, NY 11368</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,152.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address <b>GILSON/McPHEE</b> <b>7975 N Central Drive</b> <b>Wayne, PA 19087</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$100,441.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.33	Nonpriority creditor's name and mailing address <b>Gleason Paint</b> <b>65-01 Roosevelt Ave</b> <b>Woodside, NY 11377</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$54,302.47</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill - judgment</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34	Nonpriority creditor's name and mailing address <b>Grant Supplies</b> <b>39-15 21st Street</b> <b>Long Island City, NY 11101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$31,221.44</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35	Nonpriority creditor's name and mailing address <b>Greenpoint Mixed Use, LLC</b> <b>Jaspan Schlesinger, LLP</b> <b>300 Garden City Plaza</b> <b>5th Floor</b> <b>Garden City, NY 11530</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input checked="" type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Foreclosure Action</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36	Nonpriority creditor's name and mailing address <b>Henryk Sagan</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.37	Nonpriority creditor's name and mailing address <b>Jeglinski Roman</b> <b>1474 East 32nd Street</b> <b>Brooklyn, NY 11234</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,457.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address <b>Johnny PD Torres</b> <b>c/o Joesph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>unpaid wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address <b>Jose I. Guazhima</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name _____			
3.40	Nonpriority creditor's name and mailing address <b>Jose R. D. Torres</b> c/o Joseph & Norinsberg 225 Broadway, Ste 2700 New York, NY 10007	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41	Nonpriority creditor's name and mailing address <b>Joseph &amp; Norinsberg, LLC</b> 110 East 59th Street Suite 3200 New York, NY 10022	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Notice only-Representing numerous FLSA Plaintiffs in Case against Debtor</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.42	Nonpriority creditor's name and mailing address <b>Julio M. Caraballo</b> 24-05 Marion Avenue, #6A Bronx, NY 10458	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,100.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.43	Nonpriority creditor's name and mailing address <b>Julius Blum</b> PO BOX 816 Carlstadt, NJ 07072	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,255.47</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.44	Nonpriority creditor's name and mailing address <b>Kochanczyk Bartłomiej</b> 1066 Cypress Ave Ridgewood, NY 11385	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,625.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.45	Nonpriority creditor's name and mailing address <b>Kolano Andrzej</b> 1274 64th St Apt#B-10 Brooklyn, NY 11219	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,070.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.46	Nonpriority creditor's name and mailing address <b>Komorowski Slawomir</b> 91 05 97th Ave Ozone Park, NY 11416	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,000.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name _____			
3.47	Nonpriority creditor's name and mailing address <b>Kruszewski Witalis</b> <b>102 India Str., # 1L</b> <b>Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,400.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48	Nonpriority creditor's name and mailing address <b>Kunikowski Lech</b> <b>1860 75th Str #2R</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12,045.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.49	Nonpriority creditor's name and mailing address <b>Kuras Stanislaw</b> <b>297 Eckford Street #2L</b> <b>Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,187.50</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.50	Nonpriority creditor's name and mailing address <b>Kutyla Marcin</b> <b>1274 64th Street Apt#AB</b> <b>Brooklyn, NY 11219</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,525.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.51	Nonpriority creditor's name and mailing address <b>Lech S Kunikowski</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.52	Nonpriority creditor's name and mailing address <b>Lenoble Lumber</b> <b>38-20 Review Avenue</b> <b>Long Island City, NY 11101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,009.29</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid bill</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.53	Nonpriority creditor's name and mailing address <b>Lenoble Lumber</b> <b>c/o</b> <b>City Marshal Bienstock</b> <b>36-35 Bell Boulevard</b> <b>Bayside, NY 11361</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input checked="" type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred <u>Notice Only</u>		<b>Basis for the claim: _____</b>	
Last 4 digits of account number <u>5871</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.54	Nonpriority creditor's name and mailing address <b>Lewis Brisbois 633 W5th Street Suite 4000 Los Angeles, CA 90071</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.55	Nonpriority creditor's name and mailing address <b>Lipski Robert 627 Humboldt Street Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,040.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <b>Unpaid Wages</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address <b>Luis Patricio Rodgriez Sepa c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <b>Unpaid Wages</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.57	Nonpriority creditor's name and mailing address <b>Marcin Kutyla c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <b>Unpaid Wages</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.58	Nonpriority creditor's name and mailing address <b>Marly Building 858 Meeker Ave Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$23,450.70</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <b>Unpaid bill</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.59	Nonpriority creditor's name and mailing address <b>Menkos Corp dba Gleason Paints 65-01 Roosevelt Ave Woodside, NY 11377</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$52,160.34</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred <u>1/2021</u>	Basis for the claim: <b>Judgment entered 1/25/2021</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.60	Nonpriority creditor's name and mailing address <b>Modern Sprinkler 50 Middland Ave Hicksville, NY 11801</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,807.05</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <b>Unpaid bill</b>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name _____			
3.61	Nonpriority creditor's name and mailing address <b>Mr. Chimney 529 Rocland Ave Mamaroneck, NY 10543</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,695.60</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid bill</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.62	Nonpriority creditor's name and mailing address <b>Mr.T Carting 7310 Edsall Ave Ridgewood, NY 11385</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,434.77</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid bill</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.63	Nonpriority creditor's name and mailing address <b>National Grid Accounts Processing KEDLI One Metro Tech Center Brooklyn, NY 11201-3948</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,103.22</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid bill</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.64	Nonpriority creditor's name and mailing address <b>New York City Water Board Dept. of Environmental Pr 59-17 Junction Blvd., Ban 13th Floor Elmhurst, NY 11373-5108</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$155.80</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred _____		<b>Basis for the claim: <u>Unpaid bill</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.65	Nonpriority creditor's name and mailing address <b>New York State Department of Labor Claim Service PO Box 611 Albany, NY 12201-0611</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$65,614.77</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred <u>2/2019</u>		<b>Basis for the claim: <u>Speculated Amt</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.66	Nonpriority creditor's name and mailing address <b>New York State Department of Labor Claim Service PO Box 611 Albany, NY 12201-0611</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,103.11</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred <u>7/2019</u>		<b>Basis for the claim: <u>Speculated Amt</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.67	Nonpriority creditor's name and mailing address <b>New York State Department of Labor Claim Service PO Box 611 Albany, NY 12201-0611</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,611.61</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
Date(s) debt was incurred <u>10/2019</u>		<b>Basis for the claim: <u>Speculated Amt</u></b>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.68	Nonpriority creditor's name and mailing address <b>New York State Department of Labor Claim Service PO Box 611 Albany, NY 12201-0611</b> Date(s) debt was incurred <u>1/2020</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$466.72</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Speculated Amt</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.69	Nonpriority creditor's name and mailing address <b>Nowwo 80 Anthony St Brooklyn, NY 11222</b> Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$19,670.20</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Unpaid bill</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.70	Nonpriority creditor's name and mailing address <b>NOWWO Ltd c/o Murrary S Lubitz Esq 245 Main Street White Plains, NY 10601</b> Date(s) debt was incurred <u>4/2021</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$18,439.37</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Judgment entered 4/26/2021</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.71	Nonpriority creditor's name and mailing address <b>Paterrek Lukasz 2125 Amory Ct. Ridgewood, NY 11385</b> Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,872.00</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Unpaid Wages</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.72	Nonpriority creditor's name and mailing address <b>Paterrek Lukasz c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b> Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: unpaid wages</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.73	Nonpriority creditor's name and mailing address <b>PAYOMATIC PO BOX 313430 Jamaica, NY 11431</b> Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$8,900.00</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Unpaid bill</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.74	Nonpriority creditor's name and mailing address <b>Pelc Jerzy Stanislaw 60-18 Fresh Pond Road Maspeth, NY 11378</b> Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,670.00</b>
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: Unpaid Wages</b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.75	<p>Nonpriority creditor's name and mailing address  <b>Peter Furtkevic</b>  <b>c/o Joseph &amp; Norinsberg</b>  <b>225 Broadway, Ste 2700</b>  <b>New York, NY 10007</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.76	<p>Nonpriority creditor's name and mailing address  <b>Piatek Waclaw</b>  <b>8817 Bay Parkway #1E</b>  <b>Brooklyn, NY 11214</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$6,880.00</b>
3.77	<p>Nonpriority creditor's name and mailing address  <b>Pieczykolan Mariusz</b>  <b>c/o Joseph &amp; Norinsberg</b>  <b>225 Broadway, Ste 2700</b>  <b>New York, NY 10007</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.78	<p>Nonpriority creditor's name and mailing address  <b>Pomaski Marek</b>  <b>17-01 Stephen St</b>  <b>Ridgewood, NY 11385</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,040.00</b>
3.79	<p>Nonpriority creditor's name and mailing address  <b>Poweska Tomasz</b>  <b>61 Hausman St</b>  <b>Brooklyn, NY 11222</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,906.00</b>
3.80	<p>Nonpriority creditor's name and mailing address  <b>Prisciliano F Guzman</b>  <b>47-50 47th Street, #3B</b>  <b>Woodside, NY 11377</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,000.00</b>
3.81	<p>Nonpriority creditor's name and mailing address  <b>Pullutaci Raul</b>  <b>220 Suydam St</b>  <b>Brooklyn, NY 11237</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unpaid Wages</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,328.00</b>

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.82	Nonpriority creditor's name and mailing address <b>Quick Containers</b> <b>340 Beach 89th Street</b> <b>Far Rockaway, NY 11693</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$29,200.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83	Nonpriority creditor's name and mailing address <b>Quill</b> <b>PO Box 37600</b> <b>Philadelphia, PA 19101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,558.43</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address <b>Ramocki Jan</b> <b>1724 62nd Street</b> <b>Brooklyn, NY 11204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,620.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.85	Nonpriority creditor's name and mailing address <b>Ready Refresh</b> <b>Poland Spring</b> <b>PO Box 856192</b> <b>Louisville, KY 40285</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,848.87</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86	Nonpriority creditor's name and mailing address <b>Richeliu</b> <b>7021 Sterling Ponds Blvd</b> <b>Sterling Heights, MI 48312</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,229.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid bill</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87	Nonpriority creditor's name and mailing address <b>Rivera Nelson</b> <b>229 Starr St #L1</b> <b>Brooklyn, NY 11237</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$874.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address <b>Rodriguez Patricio</b> <b>21-103 52th Ave</b> <b>Corona, NY 11368</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,488.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <u><b>Unpaid Wages</b></u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name _____			
3.89	Nonpriority creditor's name and mailing address <b>Rosenzwaig Lumber</b> <b>801 East 135 St</b> <b>Bronx, NY 10454</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$30,891.34</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill - judgment</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90	Nonpriority creditor's name and mailing address <b>Rosenzweig Lumber Corp</b> <b>c/o Levy, Davis &amp; Maher</b> <b>39 Broadway, Suite 1920</b> <b>New York, NY 10006</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Notice Only</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91	Nonpriority creditor's name and mailing address <b>Sadowski Robert</b> <b>1349 40th Apt#2</b> <b>Brooklyn, NY 11218</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,736.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.92	Nonpriority creditor's name and mailing address <b>Salatiel E.C. Pasten</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.93	Nonpriority creditor's name and mailing address <b>Samuel G Juarez</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.94	Nonpriority creditor's name and mailing address <b>Segundo Oswaldo</b> <b>37-66 101 Street, #2FL</b> <b>Corona, NY 11368</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12,717.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.95	Nonpriority creditor's name and mailing address <b>Segundo R.P. Toasa</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.96	Nonpriority creditor's name and mailing address <b>Siewarga Henryk</b> <b>73 North Henry Str, #1C</b> <b>Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,750.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.97	Nonpriority creditor's name and mailing address <b>Signature Bank Card</b> <b>565 Fifth Ave</b> <b>New York, NY 10017</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$28,439.63</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>6954</u>		
3.98	Nonpriority creditor's name and mailing address <b>Sitarz Andrzej</b> <b>5956 56 th Ave, #3</b> <b>Maspeth, NY 11378</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,392.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.99	Nonpriority creditor's name and mailing address <b>Stanislaw R Siurda</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>Unknown</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.100	Nonpriority creditor's name and mailing address <b>Storczyński Zbigniew</b> <b>60-24 Bleeker St #2</b> <b>Ridgewood, NY 11385</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,200.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.101	Nonpriority creditor's name and mailing address <b>Szafran Edward</b> <b>12 First Street</b> <b>Staten Island, NY 10306</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$9,152.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.102	Nonpriority creditor's name and mailing address <b>Szafraniec Ryszard</b> <b>69-48 Juniper Blvd S</b> <b>Middle Village, NY 11379</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,132.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.103	Nonpriority creditor's name and mailing address <b>Szczubelek Wojciech 151-31 88th Street apt#3G Howard Beach, NY 11414</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$4,664.50</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104	Nonpriority creditor's name and mailing address <b>Tarnacki Miroslaw 66-15 69 Street, #3C Middle Village, NY 11379</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$3,380.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105	Nonpriority creditor's name and mailing address <b>Tarnawski Leszek 152 Kent Street Brooklyn, NY 11222</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$8,154.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106	Nonpriority creditor's name and mailing address <b>Tarnawski Mariusz 557 Woodward Ave Apt#3R Ridgewood, NY 11385</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12,315.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.107	Nonpriority creditor's name and mailing address <b>TD Bank 6000 Atrium Way Mount Laurel, NJ 08054-3918</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,267.13</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.108	Nonpriority creditor's name and mailing address <b>TD Bank 6000 Atrium Way Mount Laurel, NJ 08054-3918</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,327.13</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.109	Nonpriority creditor's name and mailing address <b>TD Bank 6000 Atrium Way Mount Laurel, NJ 08054-3918</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,551.60</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Case number (if known)	<b>1-22-40809</b>
Name			
3.110	Nonpriority creditor's name and mailing address <b>The Volakos Law Firm</b> <b>120 Bay Ridge Ave</b> <b>Brooklyn, NY 11220</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,820.05</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <b><u>returned checks</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.111	Nonpriority creditor's name and mailing address <b>W.B. Mason</b> <b>59 Centre St</b> <b>Brockton, MA 02301</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,875.43</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <b><u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.112	Nonpriority creditor's name and mailing address <b>W.W. Grainger</b> <b>58-45 Grand Ave</b> <b>Maspeth, NY 11378</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$2,469.22</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <b><u>Unpaid bill</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.113	Nonpriority creditor's name and mailing address <b>Wojdat Marek</b> <b>7258 61st Street</b> <b>Ridgewood, NY 11385</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$12,500.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <b><u>Unpaid Wages</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address <b>Workers Comp Board</b> <b>328 State Street</b> <b>Schenectady, NY 12305</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: <b><u>Notice Only</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address <b>Workers Comp. Board</b> <b>c/o James R.McGinn, Esq.</b> <b>328 State Street</b> <b>Schenectady, NY 12305</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$14,000.00</b>
	Date(s) debt was incurred _____	<input checked="" type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address <b>Worth Capital Markets</b> <b>45 Rockefeller Plaza</b> <b>20th Floor</b> <b>New York, NY 10020</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$65,507.12</b>
	Date(s) debt was incurred _____	<input checked="" type="checkbox"/> Contingent	
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
		Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Zen Restoration Inc</b>	Name	Case number (if known)	<b>1-22-40809</b>
3.117	Nonpriority creditor's name and mailing address <b>Zaremba Miroslaw</b> <b>6350 Wetherole Str, #3F</b> <b>Rego Park, NY 11374</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,294.00</b>	
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent		
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated		
		<input checked="" type="checkbox"/> Disputed		
		Basis for the claim: <b>Unpaid Wages</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.118	Nonpriority creditor's name and mailing address <b>Zawadzki Robert</b> <b>53 Willow Pl.</b> <b>Albertson, NY 11507</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$7,182.00</b>	
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent		
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated		
		<input checked="" type="checkbox"/> Disputed		
		Basis for the claim: <b>Unpaid Wages</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.119	Nonpriority creditor's name and mailing address <b>Zawojski Krzysztof</b> <b>148 S 7th Street</b> <b>Bethpage, NY 11714</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$6,389.53</b>	
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent		
	Last 4 digits of account number _____	<input type="checkbox"/> Unliquidated		
		<input checked="" type="checkbox"/> Disputed		
		Basis for the claim: <b>Unpaid Wages</b>		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

### Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Andrzej Kolano</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.45</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.2	<b>Bilski Lukasz</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.8</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.3	<b>Gabor Fazekas</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.30</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.4	<b>Jerzy Pelc</b> <b>c/o Robert Wisniewski</b> <b>17 State Street, Ste 820</b> <b>New York, NY 10004</b>	Line <u>3.74</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.5	<b>Julio M. Caraballo</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.42</u>	—
		<input type="checkbox"/> Not listed. Explain _____	

Debtor	Name	Case number (if known)	1-22-40809
	<b>Zen Restoration Inc</b>		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.6	<b>Karen Cacace</b> Chief of Labor Bureau 28 Liberty Street New York, NY 10005	Line <u>3.67</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.7	<b>Leszek Tarnawski</b> c/o Robert Wisniewski 17 State Street, Ste 820 New York, NY 10004	Line <u>3.105</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.8	<b>Marek Pomaski</b> c/o Joseph & Norinsberg 225 Broadway, Ste 2700 New York, NY 10007	Line <u>3.78</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.9	<b>Marek Wojdat</b> c/o Robert Wisniewski 17 State Street, Ste 820 New York, NY 10004	Line <u>3.113</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.10	<b>Marian Fromelc</b> c/o Robert Wisniewski 17 State Street, Ste 820 New York, NY 10004	Line <u>3.29</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.11	<b>Mariusz Tarnawski</b> c/o Robert Wisniewski 17 State Street, Ste 820 New York, NY 10004	Line <u>3.106</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.12	<b>Menkos Corp dba Gleason</b> c/o Krane Law 7600 Jericho Tpke Ste 300 Woodbury, NY 11797	Line <u>3.59</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.13	<b>Menkos Corp dba Gleason</b> c/o Camin & Gronich PLLC 105 Maxess Rd, Ste 124 Melville, NY 11747	Line <u>3.59</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.14	<b>Menkos Corp dba Gleason</b> c/o City Marshal Martin Bienstock 36-35 Bell Blvd Bayside, NY 11361	Line <u>3.59</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.15	<b>Miroslaw Tarnacki</b> c/o Robert Wisniewski 17 State Street, Ste 820 New York, NY 10004	Line <u>3.104</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.16	<b>NOWWO Ltd</b> 80 Anthony St Brooklyn, NY 11222	Line <u>3.70</u>  <input type="checkbox"/> Not listed. Explain _____	—

Debtor	<b>Zen Restoration Inc</b> Name _____	Case number (if known)	<b>1-22-40809</b>
	Name and mailing address  <b>NOWWO Ltd</b> <b>c/o City Marshal</b> <b>Martin Bienstock</b> <b>36-35 Bell Blvd</b> <b>Bayside, NY 11361</b>	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.17		Line <u>3.70</u>	<u>4762</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.18	<b>Office of the Attorney General</b> <b>28 Liberty Street</b> <b>New York, NY 10005</b>	Line <u>3.67</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.19	<b>Prisciliano F Guzman</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.80</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.20	<b>Robert I. Elan, Esq.</b> <b>14 Vandeventer Avenue</b> <b>Port Washington, NY 11050</b>	Line <u>3.28</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.21	<b>Robert Lipski</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.55</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.22	<b>Robert Sadowski</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.91</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.23	<b>Roman Jeglinski</b> <b>c/o Joseph &amp; Norinberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.37</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.24	<b>Samuel Galindo</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.31</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.25	<b>Seth Kupferberg</b> <b>Assistant Atty General</b> <b>28 Liberty Street</b> <b>New York, NY 10005</b>	Line <u>3.67</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.26	<b>Slawomir Komorowski</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.46</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.27	<b>Stainislaw Kuras</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.49</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.28	<b>Waclaw Piatek</b> <b>c/o Joseph &amp; Norinsberg</b> <b>225 Broadway, Ste 2700</b> <b>New York, NY 10007</b>	Line <u>3.76</u>	—
		<input type="checkbox"/> Not listed. Explain _____	

Debtor	<b>Zen Restoration Inc</b> Name	Case number (if known)	<b>1-22-40809</b>
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	
4.29	<b>Zbigniew Storcynski c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b>	Line	<u>3.100</u>
		<input type="checkbox"/> Not listed. Explain _____	—
4.30	<b>Zdzislaw Daniec c/o Joseph &amp; Norinsberg 225 Broadway, Ste 2700 New York, NY 10007</b>	Line	<u>3.23</u>
		<input type="checkbox"/> Not listed. Explain _____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	<b>0.00</b>
5b.	+	\$ <b>2,385,887.56</b>
5c.	\$	<b>2,385,887.56</b>

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

x

In re:  
**Zen Restoration Inc**

Case No. **1-22-40809**

Chapter **11**

Debtor(s).

x

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

Zen Restoration Inc, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 19, 2022.
2. Filed herewith is an amendment to E/F [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule E/F has been amended to include additional Creditors

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: May 26, 2022

/s/ Bernard Sobus

**Bernard Sobus**

(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK**

In re:  
**Zen Restoration Inc**

X Case No. **1-22-40809**

Chapter **11**

Debtor(s).

X

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

Zen Restoration Inc, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 19, 2022.
2. Filed herewith is an amendment to Schedule D and E/F [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule D has been amended to add IRS tax lien and correct IRS amount from \$69067.68 to \$269667.68. Additional tax liens have been added for New York State DTF, New York State Dept of Labor, Workers Compensation Board, NYC Environmental Control Board. Pedro Chomnalz and Maria A. Chomnalez have been added as creditors. Amount was corrected for Signature Bank from \$1,250,000.00 to \$1,125,000.00.

Schedule E/F has been amended to include several new creditors and addresses for notification.

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: 7/8/2022

/s/ Bernard Sobus

**Bernard Sobus**

(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

In re:  
**Zen Restoration Inc**

X Case No. **1-22-40809**

Chapter **11**

Debtor(s).

X

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

**Zen Restoration Inc**, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter **11** of the Bankruptcy Code on **April 19, 2022**.
2. Filed herewith is an amendment to **Schedule D** [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule D has been amended to include a new Tax Lien for NYC Environmental Board and all references of Signature Bank have been replaced by Humboldt Industrial LLC.

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: **8/2/2022**

/s/Bernard Sobus  
**Bernard Sobus**  
(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK**

In re:  
**Zen Restoration Inc**

X Case No. **1-22-40809**

Chapter **11**

Debtor(s).

X

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

Zen Restoration Inc, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 19, 2022.
2. Filed herewith is an amendment to Schedule E/F [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule E/F has been amended to include Rosenzqwig Lumber Corp, Workers Compensation Board of NY, Menkos Corp, and Worth Capital.

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: 9/23/2022

/s/ Bernard Sobus

**Bernard Sobus**

(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

x

In re:  
**Zen Restoration Inc**

Case No. **1-22-40809**

Chapter **11**

Debtor(s).

x

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

Zen Restoration Inc, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 19, 2022.
2. Filed herewith is an amendment to Schedule E/F [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule E/F was amended to include Bernard Sobus and Lenoble Lumber.

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: 10/27/2022

/s/ Bernard Sobus

**Bernard Sobus**

(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

x

In re:  
**Zen Restoration Inc**

Case No. **1-22-40809**

Chapter **11**

Debtor(s).

x

**AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)**

Zen Restoration Inc, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 11 of the Bankruptcy Code on April 19, 2022.
2. Filed herewith is an amendment to Schedule E/F [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Schedule E/F has been amended to add Black Marjeh and Lewis Brisbois as creditors.

4. *[If creditor records have been added or deleted, or mailing addresses corrected]* An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: December 4, 2022

/s/ **Bernard Sobus**

**Bernard Sobus**

(Signature of Debtor)

Sworn to before me this \_\_\_\_  
day of \_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public, State of New York

***Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.***

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.